

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1				51						
2	1		1				52						
3							53						
4							54						
5							55						
6							56						
7							57						
8							58						
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11							61						
12							62						
13							63						
14	1		1				64						
15	1		1				65						
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45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	↓		5	↓		↓	TOTAL IND.	↓		↓		↓	
TOTAL DEP.	↓		20	↓		↓	TOTAL DEP.	↓		↓		↓	
TOTAL CLAIMS			25				TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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